

# Work Order ID 125759

Wednesday, October 22, 2014 12:34:21 PM

**\*125759\***

Page 1

Item ID: D4886-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Air Vent  
 Start Date: 10/21/14 Start Qty: 4.00 **\*4\*** Cust Item ID:  
 Required Date: 10/21/14 Req'd Qty: 4.00 **\*4\*** Customer:  
 Reference:

Approvals: Process Plan: MLS Date: 14-10-22 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr                       | Revision Nbr             |                      |         |        |              |               |               |                  |                |
| D4886                          | A                        |                      |         |        |              |               |               |                  |                |

100

0.00

**\*100\***

Purchasing

Purchasing

PURCHASING

Memo

Issue P/O: 26253

Order from B/E Aerospace

Part # 7220-08

Specification as per dwg D4886-1

CERTIFICATION OF COMFORMETY IS REQUIRED

CL 14/10/27 4

110

Receive & Inspect for Damage & Mat'l Certs

0.00

**\*110\***

Packaging

Packaging

Memo

Ensure material release note is attached

0.00

4x SP 15-01-6.

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

# Work Order ID 125759

Wednesday, October 22, 2014 12:34:21 PM

**\*125759\***

Page 2

Item ID: D4886-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Air Vent  
 Start Date: 10/21/14 Start Qty: 4.00 **\*4\*** Cust Item ID:  
 Required Date: 10/21/14 Req'd Qty: 4.00 **\*4\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                            | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp    |
|--------------------------------|-----------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|-------------------|
| 120                            | QC6- Inspect dimensions to drawing                  | 0.00                 |         |        |              | (4)           |               |                  | DAS<br>38<br>9-89 |
| <b>*120*</b>                   |                                                     |                      |         |        |              |               |               |                  |                   |
| QC                             | Memo                                                | 0.00                 |         |        |              |               |               |                  |                   |
| Quality Control                |                                                     |                      |         |        |              |               |               |                  | JAN 07 2015       |
| 130                            | Identify as per dwg & Stock Location: <b>ST140B</b> | 0.00                 |         |        |              | 4             |               |                  | DAS<br>36<br>9-89 |
| <b>*130*</b>                   |                                                     |                      |         |        |              |               |               |                  | JAN 07 2015       |
| Packaging                      | Memo                                                | 0.00                 |         |        |              |               |               |                  |                   |
| Packaging                      |                                                     |                      |         |        |              |               |               |                  |                   |
| 140                            | QC21- Final Inspection - Work Order Release         | 0.00                 |         |        |              |               |               |                  |                   |
| <b>*140*</b>                   |                                                     |                      |         |        |              |               |               |                  |                   |
| QC                             | Memo                                                | 0.00                 |         |        |              |               |               |                  |                   |
| Quality Control                |                                                     |                      |         |        |              |               |               |                  | MLJ 15-01-08      |

**15-1-8**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------------|----------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Crosstube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td style="border: none;"></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>                                                                                                                                                 | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>                                                                                                                                                 | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>                                                                                                                                                 | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>                                                                                                                                                 | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                      |                                    |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

### FAULT CATEGORY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crimp/Kink/Ripple/Wave<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Crushing<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Marks/Chatter<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damage/Defect<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Fit/Function | <input type="checkbox"/> Folio/Program<br><input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete/Unqualified<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Misaligned/off center<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Off-set<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Outside Dimensions<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Set-up<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

# Picklist Print

Page 1

Wednesday, October 22, 2014 12:34:21 PM

Work Order ID: 125759

\*125759\*

Parent Item: D4886-1

\*D4886-1\*

Parent Item Name: Air Vent

Start Date: 10/21/14

Required Date: 10/21/14

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev. A New Issue 13/09/25 DL VERF:JLM

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

7220-08

Purchased

No

100

Each

0.0000

1

4

\*7220-08\*

\*\*

Air Vent

4X

SP15-01-6

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

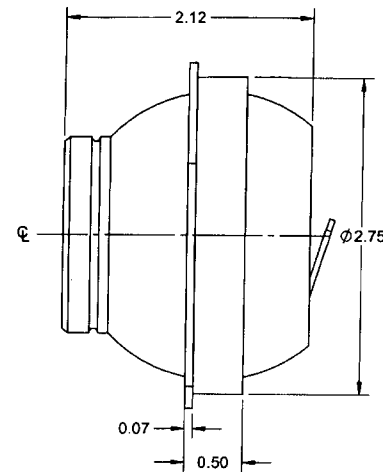
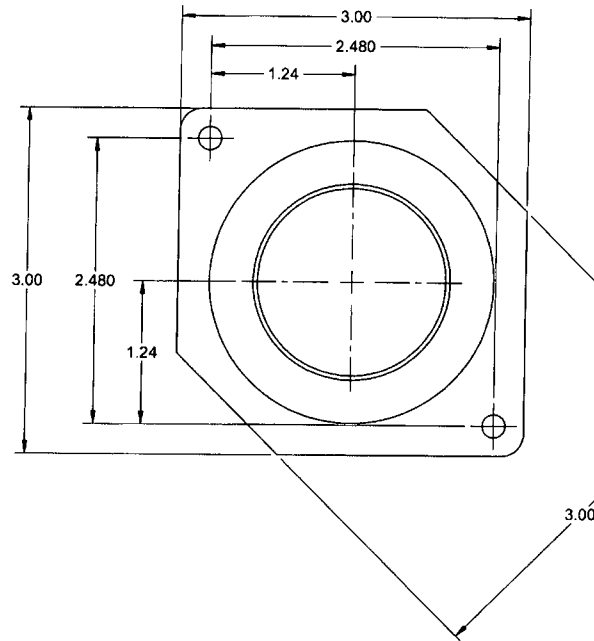
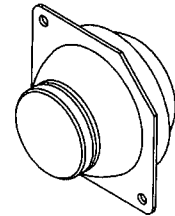
|                   |                                               |                                        |                                    |                                              |                                      |
|-------------------|-----------------------------------------------|----------------------------------------|------------------------------------|----------------------------------------------|--------------------------------------|
| Work Order: _____ | <b>DISPOSITION</b>                            | <b>AGAINST DEPARTMENT/PROCESS</b>      |                                    |                                              |                                      |
| Part No. _____    | Rework <input type="checkbox"/>               | Skid-tube <input type="checkbox"/>     | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |
| NCR No. _____     | Scrap <input type="checkbox"/>                | Machining <input type="checkbox"/>     | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |
|                   | Use-as-is <input type="checkbox"/>            | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |
|                   | Suspected Unapproved <input type="checkbox"/> | Large Fab <input type="checkbox"/>     | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |                                      |

| Root Cause    | Date | Step | Qty | Description of work order update or non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|-----------------------------------------------------|-------------------|--------------------|-------------|--------------|--------------|
| Design        |      |      |     |                                                     |                   |                    |             |              |              |
| Doc/Data      |      |      |     |                                                     |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |                                                     |                   |                    |             |              |              |
| Handling/Pre  |      |      |     |                                                     |                   |                    |             |              |              |
| Material      |      |      |     |                                                     |                   |                    |             |              |              |
| Operator      |      |      |     |                                                     |                   |                    |             |              |              |
| Offset/Setup  |      |      |     |                                                     |                   |                    |             |              |              |
| Process       |      |      |     |                                                     |                   |                    |             |              |              |
| Supplier      |      |      |     |                                                     |                   |                    |             |              |              |
| Training      |      |      |     |                                                     |                   |                    |             |              |              |
| Transport     |      |      |     |                                                     |                   |                    |             |              |              |
| Unapproved    |      |      |     |                                                     |                   |                    |             |              |              |

**FAULT CATEGORY**

| Landing Gear                                      | General                                       |                                                            |                                               |
|---------------------------------------------------|-----------------------------------------------|------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Bending                  | <input type="checkbox"/> Bend                 | <input type="checkbox"/> Folio/Program                     | <input type="checkbox"/> Outside Dimensions   |
| <input type="checkbox"/> Centre Not Concentric    | <input type="checkbox"/> BOM/Route            | <input type="checkbox"/> Grain                             | <input type="checkbox"/> Over/Under tolerance |
| <input type="checkbox"/> Cracks                   | <input type="checkbox"/> Broken/Damage/Defect | <input type="checkbox"/> Hardware                          | <input type="checkbox"/> Part Incorrect       |
| <input type="checkbox"/> Crimp/Kink/Ripple/Wave   | <input type="checkbox"/> Burrs                | <input type="checkbox"/> Inspection Incomplete/Unqualified | <input type="checkbox"/> Part Lost/Missing    |
| <input type="checkbox"/> Cuffs                    | <input type="checkbox"/> Contamination        | <input type="checkbox"/> Instructions Incomplete/Unclear   | <input type="checkbox"/> Part Moved           |
| <input type="checkbox"/> Crushing                 | <input type="checkbox"/> Countersink          | <input type="checkbox"/> Misaligned/off center             | <input type="checkbox"/> Positioned Wrong     |
| <input type="checkbox"/> Heat Treat               | <input type="checkbox"/> Cut Too Short        | <input type="checkbox"/> Mislabeled                        | <input type="checkbox"/> Power Loss/Surge     |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Drawing              | <input type="checkbox"/> Misread                           | <input type="checkbox"/> Pressure/Forced      |
| <input type="checkbox"/> Marks/Chatter            | <input type="checkbox"/> Drill Holes          | <input type="checkbox"/> Off-set                           | <input type="checkbox"/> Set-up               |
| <input type="checkbox"/> Turning Sequence         | <input type="checkbox"/> Finish               | <input type="checkbox"/> Out of Calibration                | <input type="checkbox"/> Temperature/Cure     |
| <input type="checkbox"/> Wave/Twist in Tube       | <input type="checkbox"/> Fit/Function         | <input type="checkbox"/> Out of Sequence                   | <input type="checkbox"/> Weld                 |
|                                                   |                                               |                                                            | <input type="checkbox"/> Wrong Stock Pulled   |
|                                                   |                                               |                                                            | <input type="checkbox"/> Other                |

# **SPECIFICATION CONTROL DRAWING**



SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 125759 MLS  
14-10-22

## **D4886-1 AIR VENT**

| DART PART NUMBER | DESCRIPTION | VENDOR        | VENDOR PART NUMBER | WEIGHT (lbs) | FINISH                                     |
|------------------|-------------|---------------|--------------------|--------------|--------------------------------------------|
| D4886-1          | AIR VENT    | B/E AEROSPACE | 7220-08            | 0.24         | BALL: BLACK ANODIZE<br>FLANGE: PAINT BLACK |

**RELEASED**  
2013-09-16  
MP

- NOTES:
- 1) MATERIAL: ALUMINUM (REF)
  - 2) FINISH: N/A
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
  - 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.7
  - 7) WEIGHT: PER TABLE
  - 8) REPLACES GENEVA P/N G12987

|            |                                             |           |  |                                                                                                                                                                                                                                                                                      |          |
|------------|---------------------------------------------|-----------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| A          |                                             | NEW ISSUE |  | 03                                                                                                                                                                                                                                                                                   | 13.07.03 |
| REV.       | DESCRIPTION                                 |           |  | BY                                                                                                                                                                                                                                                                                   | DATE     |
| DESIGN     | <b>DART AEROSPACE USA, INC.</b><br>KENT, WA |           |  | REV. A                                                                                                                                                                                                                                                                               |          |
| DRAWN      |                                             |           |  | SHEET 1 OF 1                                                                                                                                                                                                                                                                         |          |
| CHECKED    |                                             |           |  | DRAWING NO. D4886                                                                                                                                                                                                                                                                    |          |
| MFG. APPR. |                                             |           |  | TITLE AIR VENT                                                                                                                                                                                                                                                                       |          |
| APPROVED   |                                             |           |  | SCALE                                                                                                                                                                                                                                                                                | NTS      |
| DE APPR.   |                                             |           |  |                                                                                                                                                                                                                                                                                      |          |
| DATE       | 13.07.03                                    |           |  | COPYRIGHT © 2013 BY DART AEROSPACE USA, INC.<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC. |          |



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO26253**

Purchase Order Date 10/27/2014

PO Print Date 10/27/2014

Page Number 1 of 2

**Order From :**

VU-BE001

B/E AEROSPACE/LIGHTING SYSTEMS  
355 KNICKERBOCKER AVE.  
BOHEMIA, NEW YORK 11716

**Ship To :** DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

FA3D

**Contact Name**

Vendor Phone 631-563-6400 Ext6123

**Ship To Contact**

**Ship To Phone**

Ship Via: FedEx Overnight collect

**Ship Acct:**

**Buyer**

Chantal Lavoie

**Customer POID**

**Customer Tax #**

10127-2607

**Terms**

Net 30

**Currency**

USD

**FOB**

FCA - (Free Carrier)

| Line Nbr | Reference<br>Vendor Part Number<br>Line Comments<br>Delivery Comments                                                                                                                                                                                                                                                    | Description/<br>Mfg ID         | Req Date/<br>Taxable<br>Promise Date | CD | Req Qty/<br>Unit of<br>Measure | PO Unit Price      | Extend<br>Pr    |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------------|----|--------------------------------|--------------------|-----------------|
| 1        | 7220-08<br><br>AS PER DWG D4886 REV. A<br>B125759                                                                                                                                                                                                                                                                        | Air Vent                       | 11/28/2014<br>Yes<br>11/28/2014      | FN | 4.00<br>Each ✓                 | \$350.68           | \$1,402.        |
|          |                                                                                                                                                                                                                                                                                                                          |                                |                                      |    |                                | <b>Line Total:</b> | <b>\$1,402.</b> |
| 2        | 71401-45<br><br>Procurement Quality Clauses<br>A005 RIGHT OF ENTRY<br>A016 PERSONNEL QUALIFICATION<br>A018 ELECTRICAL EQUIPMENT<br>A025 CERTIFICATE OF CONFORMANCE<br>A040 NOTIFICATION OF QUALITY ESCAPE<br>A041 QUALITY MANAGEMENT SYSTEM<br>A042 DART NOTIFICATION BY SUPPLIER<br>A043 RETENTION OF QUALITY DOCUMENTS | PROCUREMENT<br>QUALITY CLAUSES | 11/28/2014<br><br>No<br>11/28/2014   |    | 1.00 ✓                         | \$0.00             | \$0.            |

SP/5-01-6-

**PO Instructions:** Fedex Acc#151793240

**Note:**

10/27/2014





B/E Aerospace, Inc. Business Jet Group  
Aerospace Lighting Corp.  
355 Knickerbocker Avenue  
Bohemia, NY 11716  
(631) 563-6400

# SHIPPER

SHIPPER NO: 202269



CUSTOMER NO: DA0009



Page 1 of 2

Account No.: DA0009

Dart Aerospace Ltd  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Canada

Dart Aerospace Ltd  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Canada

| OUR ORDER NO. |         | YOUR P.O. NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                  | F.O.B.              | SHIP VIA      | TERMS      | DATE SHIPPED |
|---------------|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------|---------------|------------|--------------|
| 111922        |         | PO26253                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                  | Bohemia             | FP 1517-93240 | 0.00%/0/30 | 01-05-2015   |
| ITEM          | PRODUCT | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ROW/BIN LOCATION | QUANTITY            |               |            |              |
|               |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  | OPEN                | B/O           | SHIPPED    |              |
| 1             | 7220-08 | VENT ASSY, BLACK<br>Lot #: 68103<br><br>CERTIFICATE OF CONFORMANCE<br>This is to certify that the parts furnished on this order are new and have been inspected in accordance with B/E AEROSPACE standard procedures. Material and/or parts furnished on this order have been manufactured in accordance with all applicable requirements and specifications as referred to on your order. Data which pertains to this order are available for inspection.<br><br>By: <u>CW 1-5-15</u><br>Authorized Signature.....Date<br><br>B/E Aerospace must be notified within 30 days of any discrepancies regarding this shipment. Please call 631-563-6400. For lamp breakage, please contact your freight carrier directly.<br><br>Thank you for your order. If you have any questions or need |                  | 4 /                 | 0             | 4          |              |
| NO. PIECES    |         | WEIGHT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | FREIGHT          | CUSTOMER'S ORIGINAL |               |            |              |
|               |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  |                     |               |            |              |



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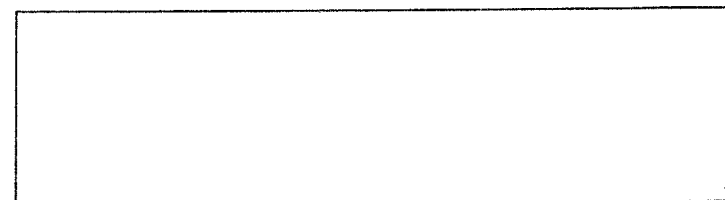


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| OUR ORDER NO. |         | YOUR P.O. NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  | F.O.B.              | SHIP VIA      | TERMS      | DATE SHIPPED |
|---------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------|---------------|------------|--------------|
| <br>111922    |         | <br>PO26253                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | Bohemia             | FP 1517-93240 | 0.00%/0/30 | 01-05-2015   |
| ITEM          | PRODUCT | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ROW/BIN LOCATION | OPEN                | B/O           | SHIPPED    |              |
|               |         | <p>any assistance please call us at 631-563-6400.</p> <p>Please remit payment to BE Aerospace Inc. at<br/>88269 Expedite Way Chicago, IL 60695-0001</p> <p>WIRE TRANSFER INFORMATION<br/>JP MORGAN CHASE BANK NEW YORK,NY<br/>ABA# 021000021, SWIFT CHASUS33<br/>FOR CREDIT TO B/E AEROSPACE, INC.<br/>ACCOUNT# 304192856<br/>NEW YORK, NY<br/>United States</p> <p>PLEASE BE ADVISED THAT THIS IS AN ORIGINAL LASER<br/>PRINTED DOCUMENT.<br/>We Now Accept American Express, Visa &amp; MasterCard for<br/>Payment. To Pay this Invoice by Credit Card, please call<br/>631-563-6400</p> | Sp 15-01-6.      |                     |               |            |              |
| NO. PIECES    |         | WEIGHT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | FREIGHT          | CUSTOMER'S ORIGINAL |               |            |              |
|               |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                  |                     |               |            |              |